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OF THE

COMMISSIONER & INSANE,

BY THE

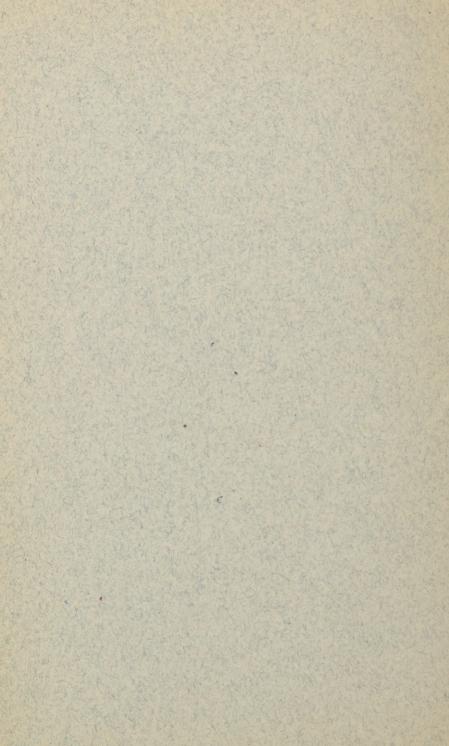
OFFICERS OF THE

Vermont Asylum for the Insane.

1876



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To the Joint Committee on the Insane, and the Insane Asylum, of the Senate and House of Representatives of the General Assembly of Vermont, now in Session:

The Commissioner of the Insane, having in his Report for the past two years taken occasion to reflect most severely upon the Vermont Asylum for the Insane and its management, the Officers of that Institution deem it their duty to review said Report, and correct the misstatements and unjust criticisms therein contained.

The origin of the Institution in a private bequest of \$10,000 from Mrs. Anna Marsh of Hinsdale, N. H., is correctly stated, as is also the aggregate amount of subsequent State Aid at \$23,-

000, (page 4).

The earliest Legislation in reference to the Institution was in 1834, when the act of incorporation was passed in conformity to the expressed wish of the founder, and in accordance with the provisions of her will. It gave to the Trustees, and their successors, the "sole superintendence and direction of the Asylum," as stated by the Commissioner, and any idea of associating her bequest with that of any other person, or of coupling it with State appropriations in such a manner as to vest its management in any other authority than that provided for in her will, was not in any manner intimated by the donor, and the question of associating with it State aid, was not debated or considered, at the time the act of incorporation was passed, by either the Assembly or the Council.

The first act of the Legislature appropriating money to the Asylum was passed Nov. 9th, 1835, and was for the expressed purpose of "enabling the said Trustees, to more effectually promote the benevolent designs of said institution" and provided "that said Trustees should take no benefit from the provisions of the Act, until they had so far erected the buildings and organized said Asylum as to receive patients therein."

The appropriation was for the payment of "two thousand dollars annually for five successive years," and provided further that "any future legislature might alter, amend, or repeal this

Act."

The second appropriation was for the sum of two thousand dollars, and was without any special stipulations, or provisos, passed Nov. 15th, 1836.

The third was in Oct., 1837, and for the sum of four thousand dollars, "for the purpose of erecting another building for the Asylum," and "provided that in future admissions to the benefits of said Asylum, a preference should be given to the resident citizens of this State."

The fourth was passed Oct., 1840, for the sum of four thousand dollars, and for the purpose of "enabling said Trustees to erect an additional wing to the building of that institution, and was conditioned upon the proviso "that this amount, together with the amount above-granted by the legislature, should be exclusively appropriated to the purpose for which the institution was established, and if the said institution should at any time cease to exist, the real estate of said corporation should be held as security to the State for the amount so granted, and might be sold under the direction of the legislature for the purpose of raising such amount, and the said real estate should at no time be sold by said Trustees without the consent of the legislature."

The fifth and last appropriation to the Asylum was made Nov. 1st, 1843, and was for the sum of three thousand dollars. It was "to enable the Trustees to extend one of the wings of the building, and to make repairs for the purpose of further accommodating the patients of said Institution," and contained the same provisos as the preceding.

By a careful examination of these various acts, it will be seen that the third and the fourth contained those provisions which are of interest to the State. By the former, that of 1837, a preference in the matter of admissions was secured to the residents of Vermont; and by the latter, that of 1840, indemnification for the appropriations made was secured, in case the Institution should cease to exist. Such in brief were the relations established in the beginning between the Asylum and the State. They have never been changed. It is only in respect to applicants from other States that selection has been exercised; all from Vermont have been received who have applied, without regard to curability or incurability, or any other conditions, if insane, and proper subjects for care and treatment. "The Financial Relation to the State" (page 6) shows the value of the Asylum property and gives the whole cost of the establishment prior to

1873 as \$234,870.00 which is substantially correct. Since that time there has been expended in the erection of two additional wings, boiler-house, etc., as shown by Report of 1874, \$56,214.18, and subsequently as shown by Report of the present year (1876), for the introduction of steam heating apparatus \$17,313.54, or the sum of \$73,527.72, in the past four years, making the total cost of the Asylum to the present time \$308,397.72, but in making these recent improvements, the Trustees have incurred a debt of \$45,000 which at the present time remains unliquidated. The constructions of 1873 are spoken of in the Commissioners Report as "large additions," implying at least a corresponding increase in capacity, hence liable to mislead the public. By reference to the Report of the Asylum 1874 (page 30), it will be seen that these enlargements of the buildings, were not in fact so much extensions of receiving capacity, as the creation of improved accommodations, for simultaneously with the occupancy of these new wings, that of the entire basement story which had previously been occupied by patients was discontinued, and devoted to other uses; and the twenty-six additional rooms gained for use of patients by the erection of said wings, have subsequently been off-set and practically lost, by the substitution of tiers of rooms in the old wings for other necessary uses, so that in reality there has been no extension of the capacity of the Institution for the past fifteen

If from the cost of the Institution (\$308,387.72) the original bequest of the founder (\$10,000), and the appropriations made by the State (\$23,000) be taken, there remains \$275,397.72 as the result of the financial management of the Institution to the present time, "more than two thirds" of which the Commissioner states "should in equity belong to the State," and be divided among the different towns that have sent patients to the Asylum," etc., etc.

We cannot imagine more specious logic than this: Nothing in the charter, nor in statutes subsequent thereto, provides for or contemplates any such distribution of ownership. We herewith submit the financial history of the Institution, showing from what sources surplus receipts have been derived, and which of the two, the Institution or the State, has in reality been the gainer, by what the Commissioner styles "a partnership" of near forty years duration.

The Commissioner enters into an "analysis of the additions" to the buildings from time to time (page 7 and 8), and of the numbers, and relative proportions of each class of patients at different times, with the view of showing that the additions were made for the accommodation of patients from other States, and were unnecessary for the wants of this State alone, and states that as long ago as the year 1841, eighty-two, or one-half the resident number were from out of the State, and the number of this class has been increasing year by year, so that the present year it is one hundred and sixty-two."

The exact number of patients from out of the State, at the dates mentioned is correct; but if the statement is designed to indicate that the proportionate number of those from other States, to those of this, has been steadily increasing, the exact reverse of this is the truth. For thirty years past, we have exact data showing the number of each class each year, and for fifteen years past (since the capacity of the Institution has been practically the same as at present) the relative proportions of State and outside patients have gradually changed, until at the present time two-thirds of the resident number are from Vermont, and the actual number of the class of Private patients, was the lowest on the first of August last, that it had been at any time since the year 1856.

Again the Commissioner complains that "the Trustees having the "sole superintendence and direction of the Asylum" have planned these additions and executed their plans without previously consulting with the Legislature of the State, and have almost invariably afterwards as each one was made, in their own reports or through those of the Commissioners of the Insane, requested the Legislature to contribute towards paying for them by increasing the price of board" etc.

It must be evident when the actual independent status of the Asylum is considered, that consultation with the Legislature in matters which the Trustees were specially responsible for in the discharge of their trusts, would be at least anomalous; and we are not a little astonished at the succeeding statements relative to applications for increase of pay after each addition made to the Asylum accommodations. That this statement was somewhat inconsiderately made appears evident from the contradictory facts

given before and after to wit. 1st. That three of the seven additions enumerated as having been made to the Institution, (after, in the opinion of the Commissioner it had attained its proper capacity) were made before any increase was made in the rate charged for State Beneficiaries. And all the additions previous to the last were made while the State price did not exceed \$1.75 per week. 2d. That until the year 1855 the State paid but \$1.50 per week. \$1.75 from that date to 1864, \$2.25 from 1864 to 1869. And \$3.00 subsequently. Showing that in the whole forty years there had been but three changes of rate by the Legislature, and these changes when made, did not immediately follow upon the erection of buildings, as appears by the date of the additions, two or more years having intervened in each case between the last erections and the change of rate, and this being necessitated more by the times than by reason of enlargement as charged. If it be still affirmed that the statement applied to "requests" not actual changes, this too is squarely contradicted by the assertion that "the state has with confiding generosity granted their requests, with only one exception we believe, and that the last one made."

The Commissioner refers to statements made by the Officers of the Asylum in their Report of 1874, (and which are also repeated in that of the present year) concerning the cost of the support of the pauper insane in the Asylums of New England, which averages more than \$4.00 per week, and says that the Chronic Insane in the Asylum at Cranston, R. I., and Tewksbury, Mass., were not included in the average. This was not as he charitably presumes "an unintentional error." It was not the design of the Officers of the Asylum to compare the cost of the support of the Insane in the State Asylums, with that of their support in Institutions not exclusively devoted to their care. The Institutions at Cranston and Tewksbury are State Almshouses, and hence under a different system of economy from that of the Asylums for the Insane, and ought no more to be included in comparisons of cost, than the Almshouses of the towns in this State. Comparisons are useless, unless confined to institutions of the same class.

At Ovid, N. Y., an Institution is located for the Chronic Insane exclusively. It was opened for patients six years ago. It now has some 1200 patients. They are distributed in groups of buildings, three in number, but all in sight of each other, and all under one organization. It takes the class that previously were

in the Almshouses, and receives those who do not recover after a two years residence and treatment in the other Asylums of the State. The Institution is built upon the farm of the State Agricultural College, and the buildings upon it were utilized for patients as far as practicable. It was believed that it could be made largely self-supporting by the labor of the inmates, and the price per week fixed at the beginning was \$2.

But the cost has never been under \$3.00, and the price per week, we are informed, has been now raised to \$4.00. Neither clothing nor the salaries of the officers have ever been included in current expenses, much less any construction account. Nevertheless the results have been regarded as eminently successful. The experience of this institution, however, demonstrates that under the most favorable circumstances possible, the labor of the inmates cannot be turned to great practical account. The percentage of the chronic insane who can under any circumstances be made "producers instead of burdens" is very small. They are persons of lost energies, and weakened will power at the best, and a very large proportion are addicted to destructive or filthy habits, necessitating the constant oversight and care of others.

The financial relation of the State with this Institution will be best understood by the statement hereto appended.

Therein is shown the average number of patients each year, the average number of beneficiaries and transient insane, and the average number of the private class, separately; the average cost per week, the rate paid by the State, the total cost per year, the amount covered by the receipts for the support of the beneficiaries and transient insane for thirty years past, and also for the private class on the basis of the State rate, (which it is claimed by the Commissioner has always equalled and even exceeded, the actual cost for current expenses); and, lastly, the difference between the latter amount and the sum actually expended, which is carried out and shown as surplus each year, (out of which has come the growth and development of the Institution.)

The aggregate surplus expenditures for the whole forty years amount to \$453,447.43. Deduct from this the cost of the land and buildings to the present time, viz., \$275,367.72 (exclusive of the \$33,000 which was the basis of the establishment), and we find there remains \$178,049.71, which has likewise been expended. No deduction is to be made from this amount except

the \$45,000 of debt, which is still unliquidated; \$133,049.71 therefore has been expended in the current disbursements, over and above what has been covered by the State rate. It shows simply that if all the patients had been from Vermont, or had been supported at the rate fixed by the Legislature from time to time, the Institution would have been now \$133.049.71 in arrears on the current expense account. In plain terms that the State has not met the actual cost of caring for her wards, and the deficiency has been made up from the surplus receipts of the Institution. These have been derived exclusively from private sources. This deficiency would be largely augmented, had interest on the cost of the establishment, and the value of the farm products been considered, neither of which have ever entered into account in any manner.

With more of truth and reason, than of error or injustice, might the assertion of the Commissioner that "the Corporation have all the profits, and the State a dearly bought experience," be reversed in its application.

"The Vital Relation to the State," as shown by tabular statistics in the Report of the Commissioner (page 10), give results totally at variance with facts, as will be seen by comparing each table with its revision as shown in the appendix to this review.

The Commissioner has not followed statistical law, in arriving at his percentages, which is that the per cent. of recoveries should be based upon the admissions, and that of deaths upon the average resident number of each year, or period of years.

His results are, therefore, inaccurate, except as to the per cent. of recoveries in the first years, which could not be otherwise, as at the opening of the establishment there were none to be taken into account but those who were subsequently received. In every other period, however, there was a previously accumulated burden to be considered, adverse to recoveries, but bearing constantly upon the death rate. The premises being erroneous, it follows, of course that all the conclusions from them are calculated to mislead the reader.

The first table compares the per cent. of recoveries in the first two with those of the last two years. It is correctly stated at 32.62 for the first period, but not for the last, the percentage being 25.22 per cent., instead of 8.08, a very vital difference.

The per cent. of deaths is incorrectly made both in regard to the first and last periods being cast upon the whole number under treatment in each instance, instead of the average resident number, which latter basis gives for the first two years 5.55 per cent., and 5.66 per cent. for the last two, a scarcely material difference.

The same table shows in the second place the percentage of recoveries for the two years ending the first decade of the Institution, and in the third place the same for the two years just ended; and here we find widely varying results. The first period shows 38.15 per cent. of recoveries and 9.24 per cent. of deaths; while the latter period gives 25.22 per cent. of the former to 5.66 per cent. of the latter.

The second table gives the comparative results of the first and the last ten years.

The per cent. of recoveries for the first period is correctly stated by the Commissioner at 42.05, but for the second period is about 10 per cent. higher than there given, viz., 32.04.

The percentage of deaths is 7.42 for the first period and 7.02 for the last, there being a fractional difference in favor of the last ten years.

The third table compares the first seven years with the year 1854 alone, and is the most fallacious of all. The latter year, as the Commissioner states, was selected because the whole number under treatment, (that is those in the Asylum at the beginning of the year, and those admitted during that year, taken together) coincided with the number admitted during the first named period; obviously no such comparison could have been made, had statistical laws been followed, unless for the purpose of supporting a preconceived theory; however, the legitimate results of the comparison show a larger per cent. of both recoveries and deaths, than during the first seven years, hence so far as the percentage of recoveries goes is in favor of the single years' results.

We do not propose, however, in refutation of gaibled statistics, to resort to the like method; but rather to rest upon the whole history of the establishment, for its statistical results, and then, as far as possible, compare them with the results of the other New England Asylums.

The large number of chronic cases carried by the Institution, necessarily limits the admissions, hence we find in most of the New England Institutions a more rapid movement of the population than in this,—and as the recoveries come from the current

admissions almost wholly, we should expect to find a larger percentage in those where the movement is greatest.

The statistics of the Vermont Asylum for the whole forty years are as follows: Percentage of recoveries, 42.09; of deaths, 8.35. For the last ten years they are as follows: Percentage of recoveries, 32.04; of deaths, 7.02.

The mean average of recoveries and deaths in the State Hospitals of New England: Maine, New Hampshire, Worcester, Taunton and Northampton, Mass.; Butler Hospital, R. I., and Connecticut, for the ten years past, is as follows: Percentage of recoveries, 32.14; of deaths, 10.25.*

The Commissioner justly anticipates the explanation that may be given of a lessened number of recoveries in the latter years, but as the corrected statistics show so much less difference in the actual results, it is scarcely necessary to refer to them. A careful and somewhat extended analysis of Asylum statistics by Dr. Jarvis some years ago, amounted to the conclusion, that of every one hundred patients treated, forty-two would recover, eight die, and the remaining fifty continue in a state of mental invalidism. In the whole history of the Vermont Asylum the results do not materially vary from this. It is true that the Institution has retained these chronic cases, where other Asylums have discharged them. The point is not waived by the statement that "they are only transferred into other institutions" so far as the statistics of the Asylums from which they are thus transferred are concerned, for they are counted as discharged there, whether they go to other institutions or elsewhere, and in view of the fact just stated regarding the curability of insanity, the charge that the chronic insane cared for in the Vermont Asylum are "of its own making" falls to the ground of its own weight, and could hardly have been made by any careful, candid and unprejudiced mind.

Accepting as "Well Established Truths and Principles" (page 17) that "Insanity is a disease of the brain," and that it " is a disease amenable to proper treatment in a large proportion of cases for its cure, and in many other cases for its amelioration," and that "Institutions of proper size, and under good management, and with all the necessary appliances and appurtenances

^{*} In Connecticut the eight year's existence of the State Hospital at Middletown, and the two previous years of the Hartford Retreat (which, until the opening of Middletown Institution, served the purposes of the State), are included to make up the period.

have an advantage in the treatment of insane patients over those treated at their own homes, both in economy and success in the way of cure," the three points made by the Commissioner, we pass to the inquiry (page 21,) "Does this Asylum apply these well-established Truths and Principles in the care and treatment of its patients, and does it meet the requirements of a well regulated institution for the care of the insane?"

In the "opinion" of the Commissioner "it does not now, and has not since the first ten years." Here we take issue. The capacity of the Institution is complained of, as being "far beyond the size capable of the best success in the cure of insanity."

This is a point that has been much discussed by those engaged in the management of such establishments, and the Association of Superintendents of the Insane Asylums of the United States, has twice placed itself on record in this matter. Formerly the curability of insanity was regarded as much greater than at present, and acting upon this belief, it was the expression of that body that "two hundred and fifty was the highest desirable number to be treated in one Institution." This was twenty-five years ago. Fifteen years elapsed and during that time the pressure upon all the Asylums in the country greatly increased. New Institutions were not created as rapidly as they were demanded. This led to the adoption of the policy quite universally of discharging the chronic to make room for the acute cases. This filled the Almshouses with incurables and entailed manifold evils. Then arose the question of separate provision for the two classes. Institutions exclusively for the incurables were opposed by the Association, on the ground that where curative agencies were not deemed indispensable, the character of Asylums would tend to degenerate into that of Almshouses-the question of dollars and cents being uppermost, and the policy of providing for all in a uniform manner, whatever might be their prospect for recovery, was favored, as having on its side the best interests of the insane. The Willard Asylum, New York, already alluded to, is the only real exception yet tried, and this, whatever may be its advantages or disadvantages, has not been any saving in expense. In 1868, therefore, the same body expressed the opinion that institutions "embracing the usual proportions of curable and incurable insane, in a particular community, may be properly carried to the extent of accommodating six hundred patients," and such is the capacity of many of the Asylums since

erected, or in process of erection at the present time, and others in existence previously, have since been enlarged to correspond with the latter conclusions. It will be seen therefore, that the Trustees of the Vermont Asylum have not pursued a policy contradictory to the views which have shaped State policy throughout this country.

Again, the Commissioner urges that this Institution "has put upon its Superintendents such a burden and so much labor, that they have little time to use, and improve those high qualifications of medical skill and experience, for which they were mainly selected," and further, that "they are reduced by this pressure upon their time and energies to mere Superintendents comparatively, and anything like individual treatment of patients is impossible."

It is true that the responsibilities, attaching to such positions are onerous enough. The Commissioner however, on page 19, fully agrees that in the organization of an establishment of this kind, its practical working "must be under the control of one man, to act both as Superintendent and Physician," hence it follows that the efficiency of all such establishments must depend upon the systematic carrying out of the working plan in its practical details. It is not expected that the Physician in Chief of a Hospital will perform all the medical and surgical duties incident to his charge personally, although the responsibility is his; but that he will be the counsellor of his Medical Assistants, and the director of the working corps, in every department.

In respect to the number of Assistants and subordinates necessary for the efficient administration of its internal economy he is expected to be the judge; and if the Superintendents of the Vermont Asylum have had any cause to complain of inability to exercise in the most efficient manner their prerogatives, it has not been from any limitation on the part of those having the oversight and direction of its affairs, but solely from the lack of means; and certainly no person practically acquainted with the management of Asylums, would consider the professional duties incident to the care of a household of the proportions of recent and chronic cases which at present compose the numbers under treatment, more difficult than would be the care of half the number composed largely of acute cases.

Again the Commissioner asserts that "the Institution has not increased its appliances and facilities for cure, as the size in-

creased." In a word the reader is led to infer that the Institution saw its best days before it had existed ten years, and has been gradually declining for the last thirty years, until it has now reached its lowest ebb.

We note with special astonishment the remarks of the Commissioner relative to religious exercises, and amusements. Although the history of the Institution as embodied in its annual reports, seems to have been thoroughly reviewed, he seems not to have taken into account its small beginning and gradual enlargement, and that many things which were practicable in its early years, became impracticable, after the establishment outgrew the family organization. Without enumerating the list of amusements specified, and lugubriously reflected upon by the Commissioner, suffice it to say, that at no period in the history of the Institution, has greater attention been paid to the subject of diversions, and to the securing of adequate religious privileges. than during the Commissioner's term of office. So important have these influences seemed to us, that we have each year marked out, and carried out a regular course of entertainments, consisting of social parties, dramatic exhibitions, exhibitions of magic lantern views, with descriptive readings, concerts, lectures, etc.. all of which have been enumerated with their dates, in the Report of the Officers of the Asylum for the period just past-and I find by reference to memoranda made at the time, that the Commissioner himself was present on no less than four occasions at these entertainments, yet no mention whatever is made of anything of the kind.

It has been the effort of the Officers of the Asylum to secure to its inmates as far as possible, all those privileges and diversions from which they are, by isolation from society, deprived; and if in any one direction our efforts have been especially successful, we think they have been in this; and in our arrangement for Sunday services, we secure every possible advantage to our household, by rotation in our clerical supply, thus affording to those of all denominations the valued privilege of hearing in turn their own.

The officers of the Institution do not regard the general plan of the Asylum as specially defective. When founded more than a generation ago, it was in accordance with the most approved architecture of the time, and though built by successive addition of wings, and carried ultimately somewhat beyond the original design, the extensions have nevertheless followed the arrangement of Institutions planned for the like capacity of this at their beginning, and which have been found to embody the greatest practical advantages.

Minor defects have been mainly remedied, and the recent improvements made, will be found more fully detailed in the Report of the operations of the Asylum for the biennial period just passed, to which we would refer in detail, and respectfully request its examination in connection with that of the Commissioner.

To the complaints that the Institution has locked doors, and guarded windows, and that mechanical restraints are employed, we have only to reply, that we have in use no safe-guards, nor restraints, not deemed essential to the proper management of every similar institution throughout our land.

The complaint against the enclosed airing courts for the use of patients who cannot with propriety be taken out upon the open grounds for exercise, ignores the fact that such persons ought rather to be protected from, than exposed to public observation, and that such provision is of the most vital importance in securing to this class, who otherwise could rarely be taken out, the constant hygienic advantages of open air and sunshine, in common with the larger class, who from the wards in general, enjoy their daily exercise in the eighteen acres of unenclosed grounds in front of the Asylum, or in longer walks along the roadside or in the fields.

The Commissioner's "Explanation of the failure of this Asylum as a Hospital for the Insane," (page 25), calls for little final comment. The points have been all met in the preceding pages of this review. The "melancholy results, as shown by the Vital Statistics," have been corrected, and will be seen to be favorable to its "management" rather than otherwise, and creditable in comparison with the other State Institutions of New England.

Its "policy" in respect to extension, has been shown to be consonant with the general State policy; and the assertion that "all its obligations were to this State" rests upon no shadow of foundation. The Commissioner conveys the impression that the interests of the insane in this State have been greatly prejudiced by the admission of those from other states, and the inference is drawn that because the Institution was patronized by the State, it should have devoted itself solely to its interests.

That no such exclusiveness, however, was contemplated, or

entered into originally, is sufficiently evident by the proviso of 1837, giving residents a first or preferred right; hence such an assumption at the present time is unwarranted, as is that relative to the building up of an establishment beyond the capacity required for the number belonging to this State, and the consequent reception of a limited number from other States, as having been detrimental to those from Vermont. It is from these that the surplus receipts of the Institution have been largely derived, and out of which have been afforded many of the advantages all have enjoyed.

Its "enormous expense to the State," pecuniarily, and "of the lives and welfare of citizens committed to its care," will be best understood by the statistical facts, carefully prepared, and herewith submitted.

To the "Recommendation" of the Commissioner, that "the Legislature dissolve the unnatural relationship of the State to the Vermont Asylum for the Insane," and erect as soon as may be a Hospital for the Insane, which shall be under its own control and management," the Trustees have only to say that this is a question for that body to decide: perhaps such a step would relieve the Vermont Asylum of some of the gross misrepresentations to which it is now subjected. The Trustees have kept scrupulous faith with the State in respect to the relations existing between it and the Asylum, and believe the interests of the former have been better served thereby, than have those of the latter. They would, however, respectfully urge the insufficiency of the allowance made by the Legislature for the support of the State Insane, and feel that it is unfair at least to institute critical comparisons between this Asylum and those of the neighboring States, without taking likewise into account what Vermont has done toward securing adequate provision and proper care of its insane, in proportion to the other States.

The Officers of the Vermont Asylum feel that it is quite time that the relations of the State to the Institution should be fully comprehended; and that if these relations are to be continued, there should be an end of all antagonism, and that henceforth a more liberal policy, and a more charitable feeling should be exercised toward the Institution. These chronic complaints and expressions of distrust, are alike injurious to the public and the Institution, and ought for the common good to be silenced.

J. DRAPER,

Secretary of Board of Trustees and Superintendent. Vermont Asylum for the Insane, Brattleboro, Oct. 25, 1876.

APPENDIX.

FIRST TABLE.

I.	Whole number of patients under treatment from December 12th to Oct. 1st, 1838			95
	Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in the Asy-	32.63 3.15	31	
0	lum Oct. 1st, 1838.		36	
2.	Whole number of patients under treatment, from Aug. 1st 1844, to Aug. 1st, 1846, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in the Asy-	² 7·37 8.05	153 45	559
	lum Aug. 1st, 1846,		291	
3.	Whole number of patients under treatment from Aug. 1st 1874, to Aug. 1st, 1876, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in the Asy-	8.08 7·79	56 54	693
	lum Aug. 1st, 1876,	!		489

FIRST TABLE—Revised.

	Whole number of patients admitted from Dec. 12th, 1836 to Oct. 1st, 1838, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum, Oct. 1st, 1838.	32.6 ₃ 5.55	31 3	95
2.	Whole number of patients admitted from Aug. 1st, 1844, to Aug. 1st, 1846, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Aug. 1st, 1846,	38.15 9.24	153 45	401
3.	Whole number of patients admitted from Aug. 1st, 1874, to Aug. 1st, 1876, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Aug. 1st, 1876,	25.22 5.66	56 54	2 2 2

SECOND TABLE.

1.	Whole number of patients under treatment first ten years, Whole number of recoveries, Whole number of deaths,		434 84	1032
	Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Aug. 1st, 1846,	42.05	291	
2.	Whole number of patients under treatment last ten years, Whole number of recoveries, Whole number of deaths,		381 348	1678
	Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in the	22.70		
	Asylum Aug. 1st, 1876,			489

SECOND TABLE—Revised.

1.	Whole number of patients admitted in the first ten years, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum	42,05 7.4 2	434 84	1032
	Aug. 1st, 1846,			291
2.	Whole number of patients admitted in the last ten years; Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths,	32.04 7.02	381 348	1189
	No. of patients remaining in Asylum Aug. 1st, 1876,			489

THIRD TABLE.

J ·	Whole number of patients under treatment from Dec. 12th, 1836, to Oct. 1st, 1843, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths,	42.97 5.98	230 32	535
	No. of patients remaining in Asylum Oct. 1st, 1843,	3.90	136	
2.	Whole number of patients under treatment during the year 1854, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Aug. 1st, 1854,	14.95 7.47	80 40	535

THIRD TABLE—Revised.

Ι.	Whole number of patients admitted from Dec. 12th, 1836, to Oct. 1st, 1843, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Oct. 1st, 1843,	42.97 6.43	230 32	535
2.	Whole number of patients admitted during the year 1854, Whole number of recoveries, Whole number of deaths, Per cent. of recoveries, Per cent. of deaths, No. of patients remaining in Asylum Aug. 1st, 1854,	49.07 10.52	80 40 389	163

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Year	Average number of patients per year,	Average number of beneficiaries per year,	Average number private patients per year.	Average cost per week per capita.	Rate paid by the State.	Total cost per year.	Amount paid for State Beneficiaries.	Amount paid for private patients.	Surplus received from private patients above cost at State Rate each year.
1837 1838 1839 1840 1841 1842 1843 1844 1845	19 35 52 75 88 104 124 147 210			\$3.52 2.73 2.81 2.43 2.52 2.33 2.02 1.83 1.53	\$1.50	3,484.71 4,970.10 7,612.68 9,473.67 11,549.13 12,615.54 13,050.15 14,092.05 16,721.45			2,002.71 2,240.10 3,556.68 3,623.67 4,635.13 4,503.54 3,378.15 2,626.05 341.45
,	,	,		,					26,957.48
1846 1847 1846 1849 1850 1851 1852 1853 1854 1855	277 297 308 315 323 331 343 361 380 392	121 122 119 116 129 137 133 137 146 147	156 175 189 199 194 194 210 224 234 245	1.55 1.71 1.93 2.14 2.01 1.99 2.22 2.23 2.28 2.49	\$1.50	23,148.05 26,445.80 30,975.93 35,110.23 33,868.93 34,349.66 39,673.96 41,877.18 45,194.20 50,924.42	9,438.00 9,516.00 9,282.00 9,048.00 8,674.93 10,686.00 10,374.00 10,686.00 11,388.00 11,466.00	13,710.05 16,929.80 21,693.93 26,062.23 23,806.93 23,663.66 29,299.96 31,191.18 33,806.20 39,458.42	1,542.05 3,279.80 6,951.93 10,540.23 8,674.93 8,531.66 12.919.96 13,719.18 15,554.20 20,346.42
	102,062.36								

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Year,	Average number of patients per year.	Average number of beneficiaries and transient insane per year.	Average number private patients per year	Average cost per week.	Rate paid by the State.	Total cost per year.	Amount paid for State beneficiaries and transient insane.	Amount paid for private patients.	Surplus received from private patients above cost at State Rate each year.
1856 1857 1858 1860 1861 1862 1863 1864 1865 1866 1870 1870 1870 1871 1872 1873 1874 1874 1875	401 410 414 423 437 451 453 450 469 486 502 513 515 515	160 171 163 167 175 187 193 186 173 176 185 196 207 220 224 233	241 239 251 256 258 257 277 293 301 306 306 293 291 273	\$2.55 2.63 2.73 2.74 2.56 2.72 2.54 2.68 2.75	\$1.75 2,25 	53,161,59 56,238,12 58,890,58 60,408,76 57,809,68 61,797,24 59,653,59 63,151,81 64,335,14 67,358,37 76,904,17 78,450,11 78,943,72 81,472,07 83,163,49 155,771,73 163,809,30 180,584,06	14,560.00 15,561.00 14,833.00 15,197.00 15,925.00 17,017.00 17,563.00 16,926.00 15,743.00 20,592.00 21,646.00 22,932.00 24,219.00 25,740.00 34,944.00 72,696.00 79,248.00 86,424.00	38,601.59 40,677.12 44,057.58 45,211.76 41,884.68 44,780.24 42.090.59 46,225.81 48,592.14 46,766.37 55,258.17 55,518.11 54,724.72 55,732.07 48,219.49 83,075.73 84,561.36 94,160.06	16,670.59 18,928.13 21,216.56 21,915.76 18,406.66 22,030.24 18,612.56 21,928.81 23,385 14 183,094.51 12,485.37 20,041.17 19,716.11 18,922.72 21,451.07 92,616,44 2,823.46 *2,100.27 16,233.36 31,760.06
									50,816.9 *—2,100.2 48,716.6 26,957.4 102,062.3 183.094.5 92,616.4 \$453,447.4

See page 8 for explanation of above table.



